

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW REST	AVAILABLE COPY		1-2-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	
Original	
1 ✓ / 4/27/01	✓ 4/27/01
2 ✓ / ✓ /	✓ 4/27/01
3 ✓ / ✓ /	✓ 4/27/01
4 ✓ / ✓ /	✓ 4/27/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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